DOCUMENT RESUME

ED 236 457 CG 017 007

AUTHOR Burck, Harman D.; Chick, Joyce M., Ed.
TITLE Basic Counseling for Personal Concerns for the Occupational Specialist. Competency-Based Modular Series.
INSTITUTION Florida State Univ., Tallahassee. Center for Studies in Vocational Education.
SPONS AGENCY Florida State Dept. of Education, Tallahassee. Div. of Vocational Education.
PUB DATE Feb 82
NOTE 54p.; For related documents, see CG 017 003-008.
PUB TYPE Guides - Non-Classroom Use (055)

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Case Studies; Competency Based Education; *Counseling Techniques; *Counselor Client Relationship; *Counselor Training; Inservice Education; Interviews; Learning Modules; Programed Instructional Materials; Referral; *Skill Development
IDENTIFIERS *Occupational Specialists

ABSTRACT

This self-instructional module, one volume of a series of competency-based modules in human relations skills for occupational specialists, is designed to introduce the specialist to some of the more general and commonly used counseling techniques and procedures, and to assist them in the acquisition of basic counseling skills. Other modules in this set of three are Basic Parent Counseling Skills for the Occupational Specialist, and Basic Vocational Counseling Skills for the Occupational Specialist. The module provides a prospectus, which details objectives and explains how to use the module; a flow-chart, which illustrates the self-instructional process; a pre-assessment quiz; and a work plan in chart form. Instructional activities (reading assignments and learning activities) are listed for each of the 10 enabling elements or lessons. The enabling elements define helping and discuss the initial interview, spotting mental illness, referral, facilitative relationships, structuring, goal setting, contracting, termination, and case studies. Each lesson includes a worksheet and a self-test; a post-assessment covering the entire module and a bibliography complete the booklet. (JAC)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED236457

Basic Counseling for Personal Concerns for the Occupational Specialist

COMPETENCY-BASED MODULAR SERIES

Harman D. Burck
Joyce M. Chick, Editor

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

This document has been reproduced as received from the person or organization originating it.

X Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

J. Mills

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

CG 017007

State of Florida
Department of Education
Ralph D. Turlington, Commissioner of Education
Tallahassee, Florida
Affirmative action/equal opportunity employer

Division of Vocational Education

February, 1982

Sponsored and published by:
Florida Department of Education
Ralph D. Turlington, Commissioner of Education

Produced by:
The Center for Studies in Vocational Education
Florida State University

For further information, contact:
Dissemination and Diffusion Section
Bureau of Research, Dissemination, and Evaluation
Division of Vocational Education
Knott Building
Tallahassee, FL 32301

Florida: A State of Educational Distinction. "On a statewide average, educational achievement in the State of Florida will equal that of the upper quartile of states within five years, as indicated by commonly accepted criteria of attainment." Adopted, State Board of Education, Jan. 20, 1981.

This public document was promulgated at a cost of $1,582.73, or $1.76 per copy, to provide instructional materials in human relations skills for occupational specialists.

DVE/2/82/900

1234567890/898765432

©State of Florida, Department of State, 1982

Authorization for reproduction is hereby granted to the State System of Public Education as defined in 228.041(1), Florida Statutes. No authorization is granted for distribution or reproduction outside the State System of Public Education without prior approval in writing.

Prepared by:
Harman D. Burck

Edited by:
Joyce M. Chick

ACKNOWLEDGMENTS

The Division of Vocational Education would like to thank Joyce M. Chick, of Florida State University, who directed this project, and Harmar D. Burck, also of Florida State University, who prepared the materials for this module.

Thanks are also due to Hattie Kaufman, editor, and John Matlock, visual designer, both of The Center for Studies in Vocational Education, Florida State University, for their contributions.

P R E F A C E

Competency-based Modular Series on Human Relations Skills for Occupational Specialists

Through grant funding by the Florida Department of Education, Division of Vocational Education, three sets of competency-based modules have been developed on Human Relations Skills for Occupational Specialists.

The need for self-instructional materials to provide competency-based training in human relations skills was identified through needs assessment research conducted by a doctoral candidate with occupational specialists in the state. Prior to the development of this modular series, no available materials in the area of human relations skills training addressed the particular needs of occupational specialists, although this type of personnel is frequently confronted with the need for human relations skills in working with students, administrators, parents, and businesspeople in the private sector. Therefore, it is anticipated that the instructional materials in this series will serve a timely need.

The modules included in this set address three areas of human relations skills: (1) Basic Personal Counseling Skills, (2) Basic Vocational Counseling Skills, and (3) Basic Parent Counseling Skills. Each module specifically ties its skills to a vocational orientation and to the job setting of the occupational specialist.

When occupational specialists develop their abilities in the above areas, their job performance should be enhanced, and they should be better equipped to meet the needs of those whom they serve.

TABLE OF CONTENTS

Prospectus 1
Module Flowchart 2
Preassessment 3
Module Work Plan 5
Enabling Element 1 6
Enabling Element 2 9
Enabling Element 3 14
Enabling Element 4 17
Enabling Element 5 ..... 2[illegible]
Enabling Element 6 25
Enabling Element 7 27
Enabling Element 8 29
Enabling Element 9 33
Enabling Element 10 35
Postassessment 38
Bibliography 46

P R O S P E C T U S

Is counseling, as a professional enterprise, a science or an art? This question has been debated and discussed in the textbooks and professional journals for several years. The current consensus holds that whereas counselors do use some scientific skills and techniques, the counseling process itself is generally an art.

The purpose of this instructional module is to introduce the occupational specialist to some of the more general and commonly used techniques and procedures for the kinds of counseling activities they may be called upon to perform. Of course, since learning to be a professional counselor takes at least two years of academic preparation, including many hours of supervised practice, training to that level is not intended here. The most that this instructional module could hope to accomplish is to acquaint occupational specialists with some counseling terminology and to assist them in the acquisition of basic counseling skills.

Objectives of the Module

After having read resource materials, participated in simulated counseling sessions, and completed structured exercises, the occupational specialist will be able to achieve the following objectives:

1. Define the counseling process and list at least ten characteristics of a good helper.
2. List two basic goals of the initial interview.
3. List five symptoms that may indicate severe mental illness.
4. List five basic principles that the counselor should follow when making a referral to another professional or an agency.
5. List the three most important ingredients of a facilitative counseling relationship.
6. List two reasons why structuring is useful in the counseling process.
7. List three criteria that should be met by goals set in the counseling process.
8. List four characteristics of a good contract.
9. List four principles to follow in order to terminate a counseling relationship in a professional manner.
10. List the eight steps in the empirical case study approach to the evaluation of the counseling process.

Working through the Module

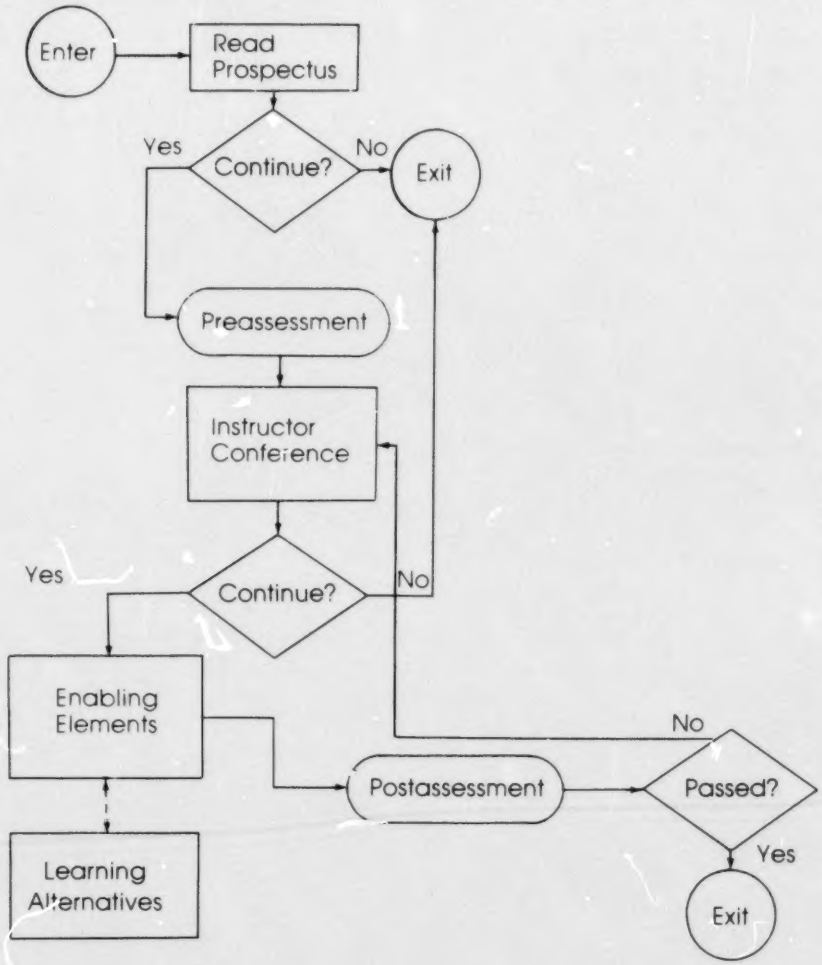
A flowchart is presented on the following page to help you progress through this module.

After you have read the Prospectus and decided to continue, you will begin by filling out the Preassessment. This test will help you select the enabling elements you need to complete. You may wish to discuss the results of your Preassessment and your choice of enabling elements with your instructor or counselor before you proceed further.

A module work plan is included to assist you in planning your activities in the module and to provide you with a format for remembering your ideas as you work through your selected objectives.

A Postassessment appears after the last enabling element. You should complete this form after you have accomplished all the elements that you have selected.

MODULE FLOWCHART



P R E A S S E S S M E N T

Please evaluate your knowledge of basic personal counseling skills by circling the letter before the appropriate response for each item below. On the basis of the instructions following the answers you choose, decide on a work plan to meet your needs in completing the objectives of the module. You may wish to consult with a supervisor or instructor in constructing your work plan.

1. Can you define the counseling process and cite at least ten characteristics of a good helper?
   A. Yes
   B. No (complete Enabling Element 1)
   C. Not sure (complete Self-Test 1)

2. Can you identify what the counselor should hope to accomplish in the initial interview?
   A. Yes
   B. No (complete Enabling Element 2)
   C. Not sure (complete Self-Test 2)

3. Can you identify symptoms that may indicate severe mental illness?
   A. Yes
   B. No (complete Enabling Element 3)
   C. Not sure (complete Self-Test 3)

4. Can you list the basic principles of the referral process in counseling?
   A. Yes
   B. No (complete Enabling Element 4)
   C. Not sure (complete Self-Test 4)

5. Can you explain how to achieve a facilitative counseling relationship?
   A. Yes
   B. No (complete Enabling Element 5)
   C. Not sure (complete Self-Test 5)

6. Can you describe the "structuring process" in counseling?
   A. Yes
   B. No (complete Enabling Element 6)
   C. Not sure (complete Self-Test 6)

7. Can you explain why goal setting is important in the counseling process?
   A. Yes
   B. No (complete Enabling Element 7)
   C. Not sure (complete Self-Test 7)

8. Can you formulate and negotiate a contract in a counseling situation?
   A. Yes
   B. No (complete Enabling Element 8)
   C. Not sure (complete Self-Test 8)
9. Can you explain why the termination phase in counseling is so important?
   A. Yes
   B. No (complete Enabling Element 9)
   C. Not sure (complete Self-Test 9)
10. Can you complete an empirical case study in a counseling situation?
   A. Yes
   B. No (complete Enabling Element 10)
   C. Not sure (complete Self-Test 10)

M O D U L E W O R K P L A N

(to be filled out with instructor's assistance)

Enabling Elements	To Be Completed	Completed	Notes and Comments
1. Define the counseling process and list at least ten characteristics of a good helper.			
2. List two basic goals of the initial interview.			
3. List five symptoms that may indicate severe mental illness.			
4. List five basic principles that the counselor should follow when making a referral to another professional or an agency.			
5. List the three most important ingredients of a facilitative counseling relationship.			
6. List two reasons why structuring is useful in the counseling process.			
7. List three criteria that should be met by goals set in the counseling process.			
8. List four characteristics of a good contract.			
9. List four principles to follow in order to terminate a counseling relationship in a professional manner.			
10. List the eight steps in the empirical case study approach to the evaluation of the counseling process.			

After having completed the assigned instructional activities, you will be able to define the counseling process and list at least ten characteristics of a good helper.

Instructional Activities

Complete activities 1 and 2 and at least five of the remaining items. Then take Self-Test 1. If you cannot answer the questions on the test correctly, repeat the activities and follow the instructions for additional activities until you are able to complete the element successfully.

1. Read the following section on "Helping—What Does It Mean?"
2. With a fellow-worker, conduct a simulated counseling session in which you take turns encouraging one another to describe all the reasons for wanting to be a helper. Try to get beyond the superficial reasons people frequently give, such as, "I just want to help people"; "People just come to me with their problems, and always have"; etc.
3. Read pages 1-17 in: Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
4. Read pages 4-6 in: Hackney, Harold, and Nye, Sherilyn. Counseling Strategies and Objectives. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
5. Read pages 10-11 in: Lewis, Edwin C. The Psychology of Counseling. New York: Holt, Rinehart & Winston, 1970.
6. Read pages 2-14 in: Danish, Steven J., and Hauer, Allen L. Helping Skills: A Basic Training Program. New York: Behavior Publications, 1973.
7. Read pages 2-10 in: Benjamin, Alfred. The Helping Interview. 2d. ed. Boston: Houghton Mifflin, 1974.
8. Read pages 2-6 in: Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.
9. Read pages 14-20 in: Egan, Gerard. The Skilled Helper. Monterey, Calif.: Brooks/Cole Publishing Co., 1975.

Helping—What Does It Mean?

There are about as many definitions of "counselor" and "helper" as there are people doing these jobs. One definition of counseling that does, however, get to the heart of the matter is Lewis's (1970): "Counseling is a process by which a troubled person (the client) is helped to feel and behave in a more personally satisfying manner through interaction and reactions which stimulate the client to develop behaviors which enable him to deal effectively with himself and his environment." It is important to note that the process discussed here deals with normal problems of development rather than with mental illness (see Enabling Element 3), and professional counselors are not the only ones who may provide these services. Since the scope of counseling is thus so broad, all of us—as parents, supervisors, and friends—frequently may be called upon to take on a helping role in our daily lives.

Help of this sort is an enabling act. The helper enables the helpee to recognize, to feel, to know, and to choose whether to

change. It is hard work and involves a commitment from the helper. Demands are made on the helper's time and interest, and his or her skills of listening and understanding are called into play.

What kind of person makes a good helper and counselor? What personality traits and personal characteristics are desirable in this individual? According to Egan (1975), a good helper:

1. has both intelligence and common sense
2. recognizes that helping involves a lot of mental work
3. shows respect for each client's unique qualities
4. is compassionate, trusting, and humane
5. is aware of personal biases and problems
6. seeks assistance for personal problems when necessary
7. does not try to force his or her own opinions and outlook on others
8. feels comfortable around people
9. participates in community activities and has wide-ranging interests
10. is inquisitive
11. takes care of his or her body
12. maintains a professional stance about confidentiality and ethics
13. does not hesitate to seek other professional opinions or make referrals when necessary
14. works at gaining a deeper understanding of his or her own personality
15. attempts to evaluate his or her own work and to increase accountability, both to clients and to financial sponsors

Self-Test 1

1. As a result of the simulated session, answer the following questions:
   a. What personal needs are you fulfilling by becoming a helper?

   b. Were you able to summarize accurately your partner's reasons for wanting to be a helper?

   c. If this exercise was helpful, why?

2. Give a definition of counseling, in your own words.

3. Write a portrait of the ideal counselor.

ENABLING ELEMENT 2

After having completed the assigned instructional activities, you will be able to list two basic goals of the initial interview.

Instructional Activities

Complete activities 1 and 2 and at least two of the remaining items. Then take Self-Test 2. If you cannot answer the questions on the test correctly, repeat the activities and follow the instructions for additional activities until you are able to complete the element successfully.

1. Read the following section on "Getting Started—The Initial Interview."
2. Conduct a simulated counseling situation, using a fellow-worker as your client for this exercise. Ask your "client" to present a personal situation that may be troubling him or her. The problem may be either actual or fabricated. The session should be as realistic as possible. When you are finished, ask your "client" to rate you on your effectiveness, filling out the worksheet contained in this element.
3. Read chapter 3 in: Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.
4. Read pages 10-18 in: Benjamin, Alfred. The Helping Interview. 2d ed. Boston: Houghton Mifflin, 1974.
5. Read chapter 5 in: Hackney, Harold, and Nye, Sherilyn. Counseling Strategies and Objectives. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
6. Read pages 56-58 in: Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

Getting Started—The Initial Interview

Since no two counseling sessions are ever the same, there can be no standard formula for starting the counselor-client relationship. People come to helpers with a multitude of personal concerns and problems, as well as with preconceived notions of what counseling is all about. Their expectations may have been formed by previous experiences with counselors, by television shows, and by what other people have told them. According to Delaney and Eisenberg (1972), "the client's expectations, attitudes, and behaviors about such things as the nature of counseling, who the counselor is, what things should and should not be discussed, whether counseling will or will not be of help, will have a persuasive influence on the present and future of the counseling process."

Two basic goals of the initial interview, as delineated by Delaney and Eisenberg (1972), are:

1. to create an atmosphere in which the client can feel safe to say the things he or she wants to say
2. to help the client realize that the counselor is listening to and understanding what the client is saying

In this first session, the helper must work to reduce the client's apprehension and anxiety. Rather than doing a good deal of talking, the helper should assume the role of active listener. He or she must pay close

attention to all the verbal and nonverbal cues the client is giving. Indeed, with the silent or nontalkative client, it is wise for the helper to attempt to discuss the problem of not being able to talk.

The initial session often is jerky and awkward and may demand a great deal of understanding and patience, but active listening and genuine concern frequently are enough to get the initial interview moving.

Initial Interview Worksheet

Have the "client" in the simulated interview answer the following questions:

1. How comfortable were you during the interview?

2. How comfortable did the counselor seem to be?

3. Were you relaxed?

4. Did you understand the counselor?

5. Did the counselor rush you?

6. Did the counselor actively listen to you?

7. Did the counselor seem to really care about you and your problems?

8. Overall, what grade would you assign to this interview (from A to F)?

Self-Test 2

1. What are the two basic goals of the initial interview, according to Delaney and Eisenberg?

2. List several adjectives that should apply to the initial interview.

3. What is active listening?

4. How do clients form their expectations about the helping relationship?

ENABLING ELEMENT 3

After having completed the assigned instructional activities, you will be able to list five symptoms that may indicate the presence of mental illness.

Instructional Activities

Complete activity 1 and at least one of the remaining items. Then take Self-Test 3. If you cannot answer the questions on the test correctly, repeat the activities and follow the instructions for the remaining activity until you are able to complete the element successfully.

1. Read the following section on "Spotting Mental Illness."
2. Visit a mental institution, take a tour of the facilities, and talk with professionals there about mental illness.
3. Read pages 22-31 in: Rowe, Clarence J. An Outline of Psychiatry. 6th ed. Dubuque, Iowa: Wm. C. Brown Co., 1975.

Spotting Mental Illness

While the occupational specialist would be unlikely to be in the position of counseling a person who is severely mentally ill, anyone in a helping profession should have some basic knowledge of the more visible and obvious characteristics that could indicate the presence of mental illness. Psychosis is the medical name for the condition exhibited by people who are disturbed enough to need medical attention and/or institutionalization for their own safety or for that of others.

The following characteristics, displayed to an excessive degree, should serve as signals to alert you to a possible need to refer the individual under consideration to an appropriate professional or to seek the advice and opinions of someone with additional training:

1. sudden hearing loss, which may be a hysterical reaction to something threatening in the client's environment or personal life
2. sudden paralysis of any part of the body, especially in the arms or legs
3. unusual affect, mood, or emotion
4. anxiety, uneasiness, or apprehension, particularly when the client is unable to explain its causation and when its onset is sudden
5. apathy, shown by a lack of feeling, emotion, or interest
6. feelings of unreality, strangeness, or altered identity
7. loss of memory
8. disturbances of consciousness, particularly when the client is confused and disoriented as to time, date, place, and people
9. disturbances of perception, especially optical and auditory illusions and hallucinations
10. disturbances of thinking, especially when the client exhibits lack of judgment and focuses on fantasies, obsessions, phobias, and delusions
11. disturbances of speech, such as uncontrollable, rapid, excessive talking and the use of incoherent or incomprehensible words and phrases

Of course, the above conditions and characteristics may also be present in normal people, to a certain extent. The key word to

remember about indications of severe mental illness is that **excessive** conditions or characteristics should be looked into seriously. For example, while most people do fantasize at times, if you are working with a client who fantasizes constantly you may want to consider making a referral for that client (see Enabling Element 4) or getting professional help.

Self-Test 3

1. What is the one key word to remember in determining whether mental illness is present?

2. List seven kinds of excessive disturbance that may be exhibited.

3. When any of the characteristics discussed in this element appears to an excessive degree, the occupational specialist should make a _____ or seek _____ help.

ENABLING ELEMENT 4

After having completed the assigned instructional activities, you will be able to list five basic principles that the counselor should follow when making a referral to another professional or an agency.

Instructional Activities

Complete all of the activities listed below. Then take Self-Test 4. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "The Referral Process."
2. Read pages 131-132 in: Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
3. Read pages 70 and 250-251 in: Lewis, Edwin C. The Psychology of Counseling. New York: Holt, Rinehart & Winston, 1970.
4. Read pages 95-96 in: Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.
5. Conduct a simulated interview in which you act as the counselor and a fellow-worker acts as a client. Explain to the "client" why you cannot help, and inform him or her that you are going to make a referral to a clinical psychologist whom you know and trust. After the interview, your fellow-worker should complete the referral interview worksheet contained in this element.

The Referral Process

No single counselor (or any other professional, for that matter) can be helpful to all of the people who seek his or her services. There are times when even the most experienced and skilled helpers admit frustration and defeat in dealing with certain kinds of people and problems. When a counselor tells the client that someone else is being asked to help instead, this process is called the "referral process." As Lewis (1970) noted, "the ethical counselor restricts his services to those persons and problems which he believes he is qualified by training and experience to handle. When a situation arises which he believes another professional could handle more successfully, the process of explaining this situation to the client is called 'making a referral'."

The process is not as easy as it may sound, particularly if the counselor has established a good relationship with the client. The client may perceive it as rejection or may assume that his or her case is really very severe.

As cited by Brammer (1973), some of the principles the helper should observe when making a referral are:

1. Know all the community resources offering different kinds of services.
2. Explore the client's readiness for referral. Has he or she expressed an interest in specialized help? Is he or she afraid of seeing a "shrink"? Take care not to frighten the client with implications about the severity of his or her problem, which may be transmitted by giving a

certain inflection to, "You had better see a psychiatrist!"

3. Be direct and honest about your observations of the client's behavior that led to the suggested referral. Be honest also about your own limitations.
4. It usually is desirable to discuss the possibility of referral with the referral agency (or professional) before the problem becomes urgent.
5. Determine what other persons have had contact with the helpee and confer with them before suggesting further steps.
6. If the helpee is a minor, it is necessary to inform the parents about your recommendations and to obtain their consent and cooperation.
7. Be fair in explaining the services of a referral agency by explaining what the agency can or cannot do. Do not imply that miracles will be performed there.
8. Let the helpee or the helpee's parents make their own appointments for the new service, unless you are specifically asked to make the arrangements.
9. Do not release information to any referral source without written permission from the helpee or his or her parents.
10. If you have been having the primary helping relationship with the client, it is only ethical to maintain that relationship until the referral is complete and a new relationship has begun.
11. After the referral has been completed and the client is in a new relationship, you should not continue to see the client unless the other persons involved are aware of it and approve of it.

Referral Interview Worksheet

Have the "client" in the simulated referral interview answer the following questions:

1. How did you feel about the counselor's referral skills?

2. Did you feel that you were being "put aside" or "put down"?

3. Did the helper come across as honest and sincere?

4. Would you go to see the referral source?

Self-Test 4

1. List several reasons why the referral process might prove difficult.

2. List seven principles of referral.

3. Describe in one sentence why referral is called a process.

ENABLING ELEMENT 5

After having completed the assigned instructional activities, you will be able to list the three most important ingredients of a facilitative counseling relationship.

Instructional Activities

Complete all of the activities listed below. Then take Self-Test 5. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "The Facilitative Relationship."
2. Conduct a simulated counseling session with a fellow-worker. The person you choose as your partner in this exercise should not be a relative or a very close friend, but neither should he or she be a complete stranger. If possible, make a tape recording of this interview and have a professional counselor or other mental health professional listen to the tape and give you feedback on how facilitative you were being in your role as counselor. After the interview, your partner should complete the facilitative interview worksheet contained in this element.
3. Read pages 50-78 in: Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.
4. Read pages 38-50 in: Benjamin, Alfred. The Helping Interview. 2d ed. Boston: Houghton Mifflin, 1974.

The Facilitative Relationship

Counseling theories are only attempts to explain how to go about doing the job. Although these theories may vary in the importance they ascribe to specific counselor behaviors, all agree on the primary need for a facilitative relationship between the helper and the helpee. In recent years much research has been devoted to conceptualizing and measuring the various facilitative ingredients of such a relationship—that is, those things the counselor says and does in the interview to promote healthy and positive change in the client.

These facilitative ingredients can be grouped into three major categories: empathic understanding, warmth and acceptance, and genuineness and honesty.

"To have empathic understanding is to know how another person feels and what he is experiencing without feeling the same way himself," according to Delaney and Eisenberg (1972). These authors state that to be empathic means to be able to make accurate inferences about clients' feelings, attitudes, and beliefs from what they are saying. Counselors not only must be aware of the clients' feelings, but they must somehow communicate this awareness. One way of accomplishing this is for the counselor to pick up on the phrases the client uses to express his or her emotions and respond directly to them.

It is almost axiomatic that counselors must be warm and accepting people. Although

these qualities are difficult to describe in writing, we all know the feeling of meeting a person for the first time and being able to recognize that he or she is warm and accepting. Of course, these traits cannot be communicated toward a person we do not really accept and like, and attempts to do so inevitably come across as phony and insincere. When this occurs in a counseling relationship, the counselor should work through the negative feelings either with the client or with a professional colleague. It is important for the helper to realize that there are differences between rejecting and disagreeing with a person. We can easily disagree with close friends and yet remain friends. When we accept people, it does not mean that we must agree with them on all points; we can disagree with them and still like them. Thus, disagreement can be expressed in the counseling relationship, as long as it is not done in a threatening or intimidating way that implies rejection of the client.

To be honest with another person, one must first be honest with oneself. When the counselor can face himself or herself in a frank and candid manner, he or she is ready to translate that into an honest relationship with a client. The other part of that human dimension, genuineness, has been described by Delaney and Eisenberg (1972) as to be "aware of one's values and beliefs, and when one acts, to always act consistently, never inconsistently, with those beliefs, values and attitudes."

Since the traits and characteristics discussed in this element occur exclusively in the affect area, they are difficult to describe in words, just as the facilitative relationship that they lead to is hard to pin down. To better understand these concepts, the beginning counselor is advised and encouraged to become involved in some sort of growth or sensitivity group or to work individually with a mental health professional.

Facilitative Interview Worksheet

Have the "client" in the simulated counseling session answer the following questions:

1. Did you feel comfortable during the interview?

2. Did you feel that the counselor was genuine in the relationship?

3. Did you feel the counselor really cared about you?

4. Was the counselor honest with his or her feelings?

Self-Test 5

1. Describe a relationship you currently have with another person. Pick a very important relationship in which you feel really comfortable. Describe your feelings about this relationship, using the three dimensions discussed in this element.

2. List the qualities of the three dimensions discussed.

3. Define each of the three dimensions.

ENABLING ELEMENT 6

After having completed the assigned instructional activities, you will be able to list two reasons why structuring is useful in the counseling process.

Instructional Activities

Complete all of the activities listed below. Then take Self-Test 6. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "Structuring."
2. Read pages 59-62 in: Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
3. Read pages 86-87 in: Lewis, Edwin C. The Psychology of Counseling. New York: Holt, Rinehart & Winston, 1970.

Structuring

Like so many other concepts in the counseling process, structuring is a difficult one to explain. Essentially, the purpose of structuring is to alert the client to the limits of the counseling relationship. As such, it is accomplished by general, rather than carefully defined, exhanges. Sometimes structuring may form a major part of the early counselor-client sessions, while at other times it may not even be clearly identifiable. When the counselor makes statements or comments that describe his or her view of the nature of counseling and the way the counseling will proceed, structuring is taking place. The process sets the goals and objectives of each participant and answers such questions as "Where are we going?" and "How will we get there?"

During the initial sessions with a new client, the counselor explains his or her personal philosophy about helping people, and sets forth policies about fees, appointments, and cancellations. Further, the counselor must make sure the client understands the role each of them will play and what is expected in the way of topics to be discussed, honesty, self-disclosure, and responsibility.

In summary, structuring ensures that both parties to the relationship are following the same ground rules and that the client is informed of the boundary lines to be observed and the tasks assigned to each player.

Self-Test 6

1. List some of the advantages of structuring in counseling.

2. What are some client behaviors that indicate a need for greater structure in the counseling relationship?

3. How does structuring occur in the counseling process?

4. List five ways in which the counselor structures the counseling sessions.

ENABLING ELEMENT 7

After having completed the assigned instructional activities, you will be able to list three criteria that should be met by goals set in the counseling process.

Instructional Activities

Complete both of the activities listed below. Then take Self-Test 7. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "Goal Setting."
2. Read pages 43-48 in: Hackney, Harold, and Nye, Sherilyn. Counseling Strategies and Objectives. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

Goal Setting

During the initial sessions of the counseling relationship, counselors expend most effort on listening to the client and attempting to understand the problems presented. As the course of counseling progresses, emphasis begins also to be placed on setting some goals for the client to achieve.

This goal setting is an activity that is actively engaged in by both the counselor and client. There is no way a counselor can independently set goals for another individual; the client must be involved and really motivated if the goals are to be met.

Krumboltz (1966) has stated three criteria to be considered when setting goals in counseling.

1. Goals should be specific—that is, the client should know exactly what kinds of specific behaviors he or she wants to achieve. For example, rather than "to do better in school," a more specific goal would be "to bring my GPA up to at least a 3.0 in the next two semesters."
2. Goals should be observable by both the client and the counselor. They must involve the demonstrable attainment of a task so that there is no doubt when the goal has been met.
3. Goals should be realistic and attainable. Too frequently, clients do not make any changes in their behavior because the only goals they set are unrealistic goals. (Most New Year's resolutions or decisions never again to eat fattening foods fall into this category.) Attainable goals must take into account the real-world situation. A small, weak youngster will not become a heavy-weight boxing champion; a rather dull, unmotivated youngster from a poor family will not become a brain surgeon.

The routine of setting goals and working toward their attainment provides a dimension of directionality to the counseling process.

Self-Test 7

1. Who should be involved in goal setting?

2. List three characteristics of useful goals.

3. List three purposes of setting goals in counseling.

ENABLING ELEMENT 8

After having completed the assigned instructional activities, you will be able to list four characteristics of a good contract.

Instructional Activities

Complete all of the activities listed below. Then take Self-Test 8. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "Contracting in Counseling."
2. Read pages 5-6 and 61-62 in: Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
3. Read chapter 5 in: Reardon, Robert C., and Burck, Harman D., eds. Facilitating Career Development: Strategies for Counselors. Springfield, Ill.: Charles C. Thomas, 1975.
4. With a fellow-worker, conduct a simulated counseling session. You play the role of the counselor, and have your partner, as the client, present a problem. Use what you have learned in this element to negotiate a contract with the "client." After the interview, the "client" should complete the contracting worksheet contained in this element.

Contracting in Counseling

As Brammer (1973) puts it, "[A contract] is an agreement between the helper and the helpee that they will work toward certain goals, that each will carry out specific responsibilities to achieve the goals, and that certain specific outcomes will be taken as evidence that the help was successful."

If this type of contract is to work, it must contain certain basic characteristics of a good contract. First of all, it must be agreed upon by both parties. It is essential that the client not only be motivated to carry it out, but be capable of carrying it out. This, of course, is achieved by the setting of realistic and attainable goals in the contract. The terms of the contract must be moral, ethical, and legal, and they must be consistent with the client's values and outlook. In forming the contract, the helper and the client must strive to avoid vagueness and ambiguity, so that the document, as concluded, defines the established goals in terms of observable behaviors. In this way, the parties will be able to agree when the contract has been fulfilled.

The advantages of contracting are manifold. In the first place it provides for an efficient way of managing the counseling process. Because it clearly stipulates each participant's role, it provides safeguards against game-playing and keeps the focus on the goals that have been set. In this way, it also ensures that the helper and the client are not working at cross-purposes. Since it spells out the outcomes to be attained, the contract offers a built-in means of assessing the results of the counseling relationship.

Actually negotiating such a contract may, at times, require a great deal of tact and insight. The counselor must be prepared for the client to attempt to shift or avoid responsibility and to indulge in diversions. It is

then up to the counselor to keep the negotiation on track by questioning the client's objectives and motives.

To facilitate the execution of the agreed-upon contract, the counselor must be firm. Along with this firmness, however, he or she should be warm and supportive and should not hesitate to use humor, when called for. A certain amount of flexibility is also required, since the goals and terms of the contract may need to be altered if new information or situations should arise.

Brammer (1973) points to the basic principles of contracting as follows:

1. A contract is an agreement between the counselor and the client and is concerned with the nature and conduct of responsibilities.
2. A contract should refer to a given period of time and contain a termination date.
3. All parties (counselor, client, and significant others) must understand and agree to the contract.
4. The contract must contain provisions for monitoring and management.

Contracting Worksheet

Have the "client" in the simulated counseling session answer the following questions:

1. Did you feel comfortable about the way the occupational specialist formulated the contract?

2. Did you understand exactly what were to be your responsibilities in fulfilling the contract?

3. Did you understand when the contract was to be terminated?

Self-Test 8

1. List three advantages of contracting.

2. List three characteristics of a good contract.

3. List three principles of contracting.

ENABLING ELEMENT 9

After having completed the assigned instructional activities, you will be able to list four principles to follow in order to terminate a counseling relationship in a professional manner.

Instructional Activities

Complete all of the activities listed below. Then take Self-Test 9. If you cannot answer the questions on the test correctly, repeat the activities until you are able to complete the element successfully.

1. Read the following section on "The Termination Phase of the Counseling Relationship."
2. Read pages 138-139 in: Dustin, Richard, and George, Rickey. Action Counseling for Behavior Change. New York: Intext Educational Publishers, 1973.
3. Read pages 167-192 in: Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.

The Termination Phase of the Counseling Relationship

There always comes a point when the counselor and client must part company. Frequently, and unfortunately, the termination occurs right after the initial interview or after only a few sessions. The reasons for this are numerous and include the client's not liking the counselor, feeling threatened, not understanding the counseling process, or not being motivated to change.

In other cases, when the client and counselor have had a satisfying relationship and one that has been productive, the termination process is not so easily accomplished as might be expected. Once a good relationship has developed, it may be difficult for both the counselor and the client to terminate it. Think for a moment about the emotional strain of terminating a relationship with a loved one—be it a relative or a close friend—because of a move, death, or some other reason. Ending a good counseling relationship can be similarly delicate.

According to Delaney and Eisenberg (1972), the goals to be aimed at during the termination phase are:

1. to reinforce the client's behavior changes in the direction of the goal that had been stated by the client
2. to make sure the client does not still have other pressing concerns
3. to help the client realize that he or she may seek the counselor's aid at any time in the future—"the door is always open"

Regardless of the reason for terminating the relationship, whether it is because the client's goals have been met or for some other reason, such as an out-of-town move by either the counselor or the client, certain guidelines should be followed to assure that the termination is conducted in a professional manner. The termination should be a gradual process rather than a sudden change. If at all possible, it should not come as a surprise to either party. The counselor should frankly express his or her feeling about the termination and should encourage the client to make an honest assessment of what progress has been made over the course of the counseling relationship.

Self-Test 9

1. List several reasons why the termination of close relationships is emotionally difficult.

2. List three goals to be aimed at during the termination process.

3. List three guidelines to follow in the termination of a counseling relationship.

ENABLING ELEMENT 10

After having completed the assigned instructional activities, you will be able to list the eight steps in the empirical case study approach to the evaluation of the counseling process.

Instructional Activities

Complete the first activity listed below. Then, to complete activity 2, use the data contained in Self-Test 10 and write up an empirical case study. Have it evaluated by a professional counselor or mental health worker.

1. Read the following section on "The Empirical Case Study."
2. Read carefully the counseling situation presented in Self-Test 10 and render the data into an empirical case study. This report should be evaluated by and discussed with a professional counselor or other mental health worker.

The Empirical Case Study

Introduction

There are many ways to evaluate the progress of one's professional endeavors, and with the growing importance of accountability such evaluations become more crucial. Legislators and the public in general want to know if professionals and paraprofessionals are doing their jobs; essentially they are asking: "What is it you do that makes a difference in the lives of those whom you serve?" Because of the intangible and esoteric nature of counseling (i.e., establishing facilitative relationships), this may be a difficult question for the helper to answer. Undoubtedly, counselors and other mental health workers must constantly seek better ways to provide explanations and evaluations of their work. Since the traditional research model has not proven to be particularly appropriate to this task, alternative approaches are being devised.

One such alternative approach is the empirical case study. (By no means are we suggesting that this is **the** answer to the accountability issue, but it is a step in the right direction.) The following outline of how to do such a case study need not be followed in a rigid fashion. Rather, it should be used as a guide, recognizing that the counseling process will often weave in and out of the sequential steps enumerated.

Format

Step 1	Client—List the demographic data about the client: age, occupation, marital status, and other significant information.
Step 2	Problems—The problems should be stated in the client's own words. Then they should be stated as the counselor understands them. Include the counselor's impressions. These problems should then be put in order of importance, as agreed upon by the counselor and the client.
Step 3	Statement of outcomes—Describe the goals that have been set. (See Element 7.)
Step 4	Baseline data—Indicate the relationship between where the

client is now and what he or she hopes to achieve (as stated in Step 3). This information can best be obtained by asking the client to keep a weekly log of those times and situations when his or her problems seem to surface. For example, if the client is very anxious, the task would be to keep a log of when he or she is most anxious, in what kinds of situations, with what people, during what part of the day or week, etc. The counselor can then monitor this log during regular sessions.

Step 5 Acceptable level of performance—Indicate what the counselor and the client have agreed upon as an acceptable indicator to show that counseling has been successful. A client who has a GPA of 1.7 might agree with the counselor that if he or she can achieve a GPA of 2.0 after one semester of study skills training, the counseling will have been a success.

Step 6 Process variables or treatment—Describe clearly what the counselor will do to achieve the outcomes listed in Step 3, what the client will do, and what significant others (spouse, parents, teachers, supervisors, etc.) will do. This step clarifies the counseling process.

Step 7 En route assessment—Evaluate how the counseling is proceeding. At the end of each interview, the counselor and the client should pause to look at the process and the outcomes up to that point.

Step 8 Post measures—Perform a follow-up on the client after the counseling has been terminated. This can be done by mail or telephone, and it is intended to assure the client that the counselor is still interested in the progress being made. It gives the counselor a chance to check on the client's further growth.

Lengthy forms are not needed on which to record the data of an empirical case study. Some of the clearest empirical case notes can be kept on index cards, using short phrases or adjectives alone.

Self-Test 10

Your task in this self-test is to take the following data and render it to conform to an empirical case study using the format just presented. Have a professional counselor or other mental health worker evaluate this and provide feedback for you.

Counseling Situation

Rosie is an 18-year old girl from a small town in Florida. She is presently a freshman in the Division of Basic Studies at State University. She presents herself at the counseling services offices.

Rosie is the middle child of six from Beanville. She did quite well (both academically and socially) in high school. In fact, she was voted Beanville High's Doll and "Bean Queen" in her hometown, because of her good looks, influential parents, outgoing personality, wealthy grandparents, and cooking skills (she makes a mean bean casserole). She was also a cheerleader and a member of every school activity except the boy's glee club, of which she was the "Sweetheart." Several of Rosie's schoolmates are also at State University.

During the initial interview with you, Rosie appears a bit nervous but is quite articulate. She states that she sees her problems as (1) feelings of loneliness with no real friends (she can't stand her sloppy roommate) and very few social outlets; (2) confusion about what she wants to major in and what kind of vocation and career she wants to pursue; and (3) lack of motivation to do any studying at all. She likes her courses fairly well but has a cumulative average of only 2.4; her high school final grade average was 4.0.

In summary, Rosie feels that she would like to meet friends and be more popular, she needs help and direction in deciding her educational and career pursuits, and she needs to be motivated and taught how to study more effectively.

Task

Your task is to figure out how you, the counselor, are going to evaluate this situation as an empirical case study. More specifically, you need to restate Rosie's problems in more concrete fashion and establish your goals for counseling (stipulating that Rosie will go along with them). What will be the desired outcomes? What baseline data do you need? What will be an acceptable level of performance? What criterion measures will you use? What treatment approach(es) seem indicated? How will you know when you are on the right track (using en route measures)? What post measures will be taken?

Include the counselor's subjective evaluation and client's self-satisfaction rating, as well as any necessary additional comments.

Be specific and concise. Think creatively.

P O S T A S S E S S M E N T

1. a. Define the counseling process. (To verify your answer, see Element 1. Score 10 points.)

b. List at least ten characteristics of a good helper. (To verify, see Element 1. Score 10 points.)

2. List two basic goals of the initial interview. (To verify, see Element 2. Score 10 points for each goal, for a total of 20 points.)
(1)

(2)

3. List five symptoms that may indicate severe mental illness. (To verify, see Element 3. Score 4 points for each symptom, for a total of 20 points.)

(1)

(2)

(3)

(4)

(5)

4. List five basic principles that the counselor should follow when making a referral to another professional or an agency. (To verify, see Element 4. Score 4 points for each principle, for a total of 20 points.)

(1)

(2)

(3)

(4)

(5)

5. List the three most important ingredients of a facilitative counseling relationship. (To verify, see Element 5. Score 5 points for each ingredient, for a total of 15 points.)
(1)

(2)

(3)

6. List two reasons why structuring is useful in the counseling process. (To verify, see Element 6. Score 10 points for each advantage, for a total of 20 points.)
(1)

(2)

7. List three criteria that should be met by the goals set in the counseling process. (To verify, see Element 7. Score 10 points for each criterion, for a total of 30 points.)
(1)

(2)

(3)

8. List four characteristics of a good contract. (To verify, see Element 8. Score 5 points for each characteristic, for a total of 20 points.)
(1)

(2)

(3)

(4)

9. List four principles to follow in order to terminate a counseling relationship in a professional manner. (To verify, see Element 9. Score 5 points for each guideline, for a total of 20 points.)
(1)

(2)

(3)

(4)

10. List the eight steps in the empirical case study approach to evaluation of the counseling process. (To verify, see Element 10. Score 5 points for each step, for a total of 40 points.)
(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

Total value of points = 225

If your score is below 180, you should consult your supervisor or repeat those elements in which you did not do well.

BIBLIOGRAPHY

Benjamin, Alfred. The Helping Interview. 2d ed. Boston: Houghton Mifflin, 1974.

Brammer, Lawrence M. The Helping Relationship: Process and Skills. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

Danish, Steven J., and Hauer, Allen L. Helping Skills: A Basic Training Program. New York: Behavioral Publications, 1973.

Delaney, Daniel J., and Eisenberg, Sheldon. The Counseling Process. Chicago: Rand McNally and Co., 1972.

Dustin, Richard, and George, Rickey. Action Counseling for Behavior Change. New York: Intext Educational Publishers, 1973.

Egan, Gerard. The Skilled Helper. Monterey, Calif.: Brooks/Cole Publishing Co., 1975.

Hackney, Harold, and Nye, Sherilyn. Counseling Strategies and Objectives. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

Krumboltz, J.D. "Behavioral Goals for Counseling." Journal of Counseling Psychology 13 (1966): 153-159.

Lewis, Edwin C. The Psychology of Counseling. New York: Holt, Rinehart & Winston, 1970.

Reardon, Robert C., and Burck, Harman D., eds. Facilitating Career Development: Strategies for Counselors. Springfield, Ill.: Charles C. Thomas, 1975.

Rowe, Clarence J. An Outline of Psychiatry. 6th ed. Dubuque, Iowa: Wm. C. Brown Co., 1975.